

Uganda Catholic Medical Bureau

The Natural Plan 2014-2018

Sharing learnings on IRH FP project from
Rwanda and Uganda with CSSC Tanzania

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Overview of UCMB

- UCMB is the Health department of the Uganda Episcopal conference (UEC)
- Was formed in 1934 “To provide professional and sustainable health services through partnerships to the popn to live their lives to the Full”
- Has 296 Health facilities accredited to date
- These facilities contribute up to 23% of total hospitals and 13% of health centers in Uganda.



WHAT ARE FERTILITY AWARENESS METHODS?

Standard Days Method



CYCLEBEADS HELP A WOMAN TO:

- Track her cycle days
- Know when she is fertile
- Monitor her cycle length
- Communicate with her partner

Standard Days Method

Is appropriate for women:

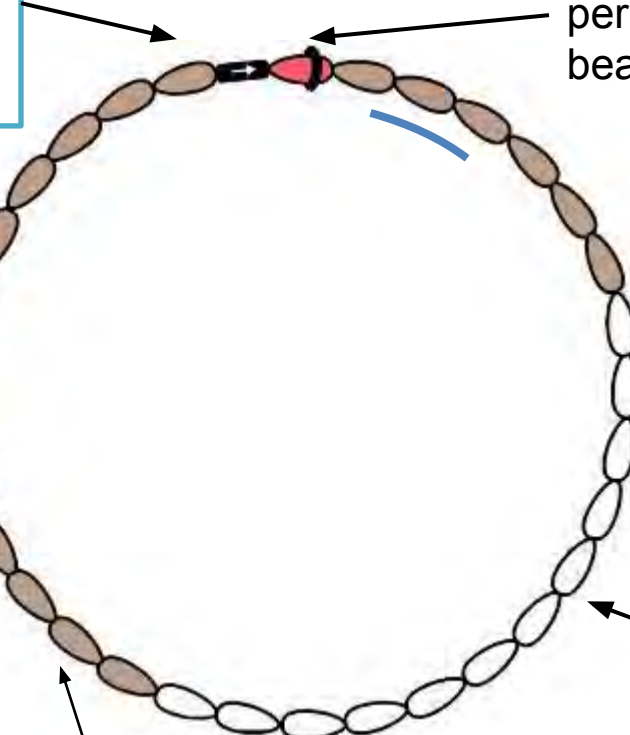
- With menstrual cycles between **26 and 32 days** long
- Who are able to communicate with their partner about when to have sex

How does it work?

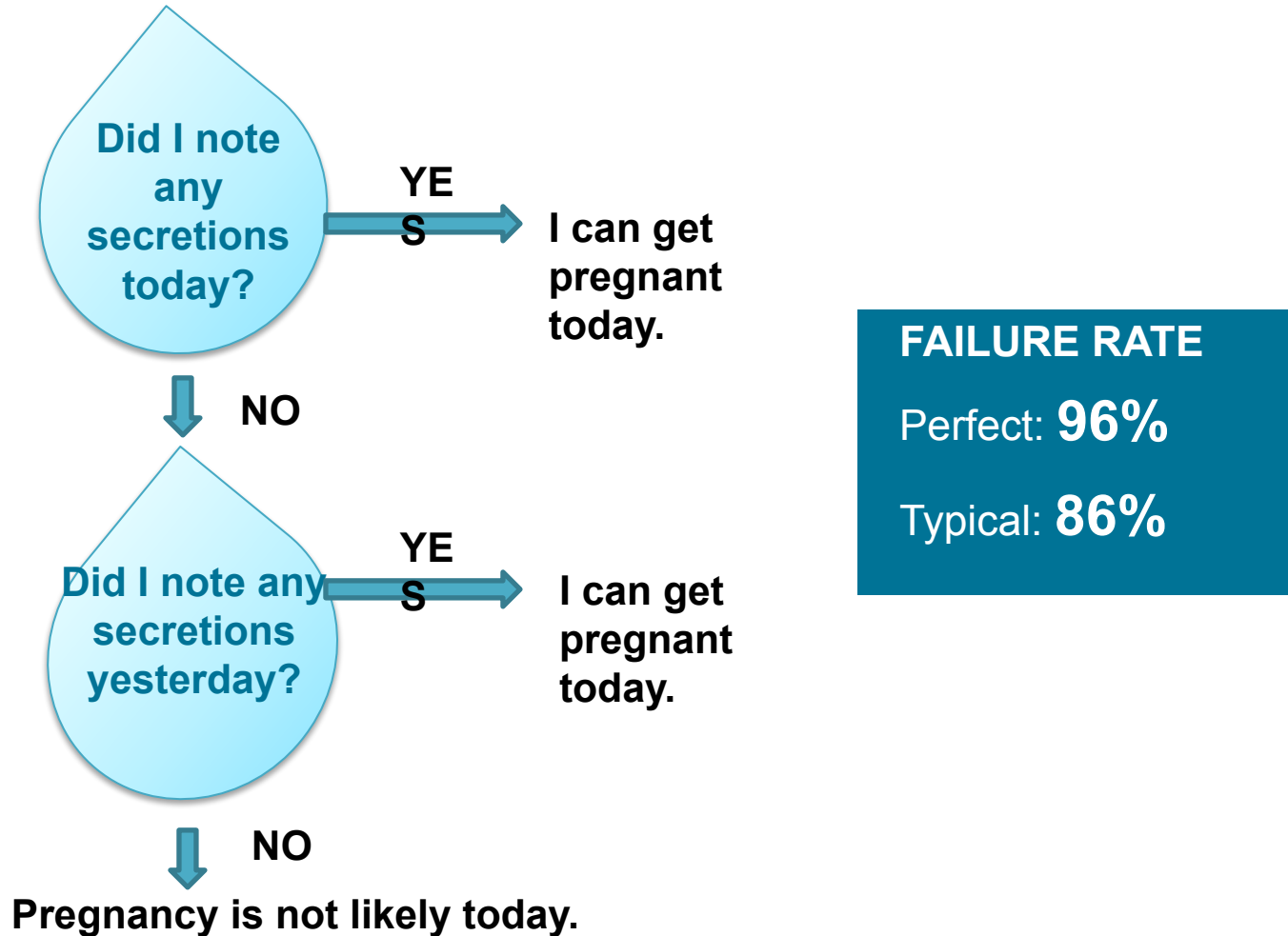
If you have not started your period by the day you put the ring on the last brown bead, your cycle is longer than 32 days. Contact Provider.

If you start your period before you put the ring on the darker brown bead, your cycle is shorter than 26 days. Contact Provider.

When you start your next period, move the ring directly to the red bead and start again.

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1. On the day you start your period, move the ring to the **RED** bead.
2. Every morning move the ring to the next bead. Always move the ring from the narrow to wide end. (Direction blue arrow)
3. On **WHITE** bead days you can get pregnant. Avoid sex to prevent a pregnancy.
4. On **BROWN** bead days you can have intercourse with very low chance of a pregnancy.

WHAT IS TWODAY METHOD



WHAT IS LAM?

The Lactational Amenorrhea Method (LAM) is a highly **effective modern, postpartum** family planning method, based on natural infertility resulting from certain patterns of **breastfeeding**.



LAM Criteria

1. **Menstruation** has not returned,
2. **Mother only** breastfeeds, and
3. **Baby is less** than 6 months old

Contraceptive Failure of User-Directed Methods
% of women who became pregnant during 1st year of use

| | Correct Use | Typical Use |
|-----------------------------|--------------------|--------------------|
| No Method | 85 | 85 |
| Spermicides | 18 | 29 |
| Diaphragm | 6 | 16 |
| Condom | 2 | 15 |
| TwoDay Method | 4 | 14 |
| Standard Days Method | 5 | 12 |
| Pill | .3 | 8 |
| LAM | 1 | 3 |

WHY FERTILITY AWARENESS METHODS?

FAM ADDRESSES WOMEN'S CONCERNS about family planning and helps fill a critical gap in programs

| REASONS FOR CHOOSING SDM | SIX COUNTRIES |
|--------------------------|---------------|
| DOESN'T AFFECT HEALTH | 70% |
| NO SIDE EFFECTS | 20% |
| ECONOMICAL | 30% |
| EASY TO LEARN/USE | 10% |

[Source: Interviews with Users in 6 Countries]

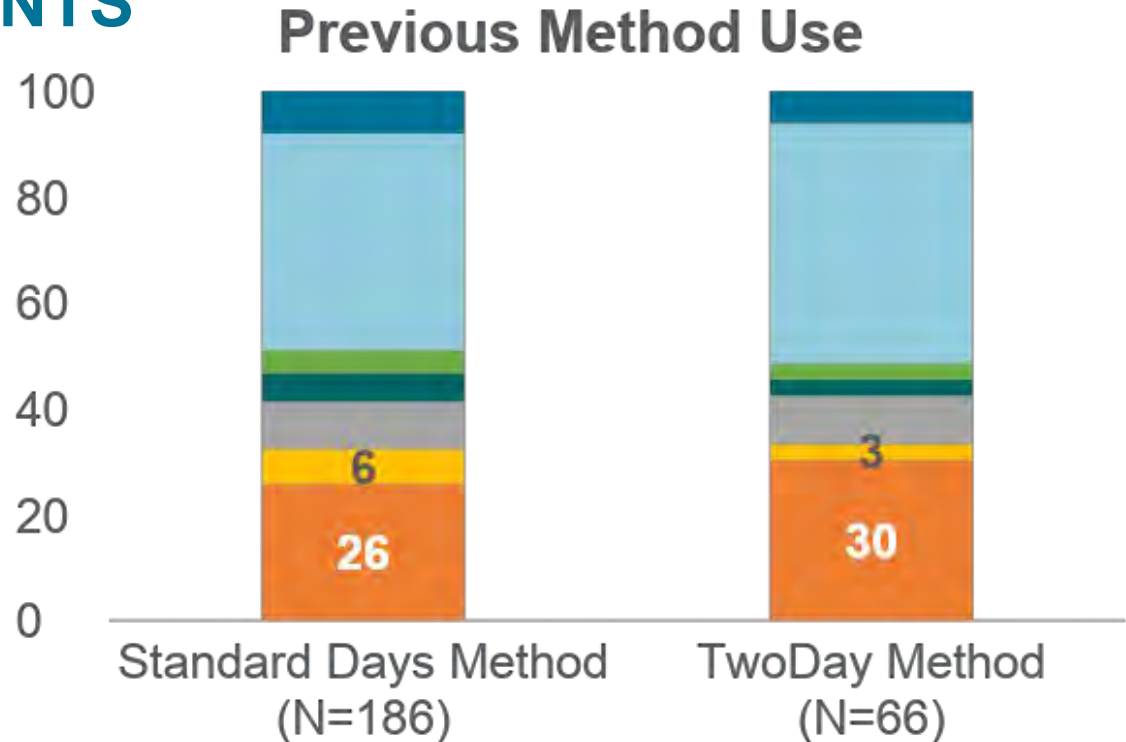


ATTRACTS FIRST-TIME USERS:

PREVIOUS METHOD USE BY FAM CLIENTS

1 in 3

FAM users
in Uganda
had never
used a
modern
method



- No Method
- Withdrawal
- Condoms
- FAM
- Injectable

Can couples use FAM effectively?

| SDM N=149 | TWODAY N=48 |
|---|--|
| <i>Abstained or used a condom on fertile days in the past month</i> | <i>Abstained or used a condom on fertile days in the past month AND checks secretions at least twice a day</i> |
| 85% | 83% |



“The fact is that **SDM is considered a modern method**, based on the way it was developed and tested in clinical trials. WHO has included it in all of its guidelines as a modern method.” | JEFF SPIELER, USAID



- IPPF Medical Bulletin – 2000, 2003
- WHO Medical Eligibility Criteria – 2002-Present
- WHO FP Decision-Making Tool – 2005, 2015
- Contraceptive Technology – 2004, 2009, 2011, 2014
- WHO Global Handbook for Family Planning – 2008, 2011
- PAHO, Medical Eligibility Wheel - 2012
- Pop Council Balanced Counseling Strategy – 2006, 2010
- Demographic and Health Surveys – 10 countries
- Included SDM in Current FHD's DMT tools (DoHS, FHD 2014)
- Ministries of Health norms and policies 2003 – 2016
- High Impact Practice (HIP) Briefs (USAID, UNFPA) – 2013-Present
- WHO CycleBeads Procurement Guidance 2014
- Global Health Science & Practice (GHSP) USAID -- 2016



NEW! ARTICLE

COMMENTARY

Fertility Awareness Methods: Distinctive Modern Contraceptives

Shawn Malarcher,^a Jeff Spieler,^b Madeleine Short Fabric,^a Sandra Jordan,^a Ellen H Starbird,^a Clifton Kenon^a

Fertility awareness methods—the Lactational Amenorrhea Method, the Standard Days Method, and the Two Day Method—are safe and effective, and they have important additional benefits that appeal to women and men. Including these modern contraceptives in the method mix expands contraceptive choice and helps women and men meet their reproductive intentions.

This peer-reviewed commentary represents the technical position of the Office of Population and Reproductive Health of the United States Agency for International Development.

MALE INVOLVEMENT: what FAM users say



“Ever since we started using the natural family planning, our home is full of love.” - Wife

“To add on, people reach to us and copy what we do. We help them to use the natural family planning.” - Husband



“We have acquired the awareness of being healthy. Again the knowledge of loving each other man and woman. We need to work together on organization, where we save money for school fees of our children every month. Those are some of the benefits have achieved.”

- Wife

Male partners are involved in method use, most often with FAM.

N=8

94%

- Reminds me to move ring
- Abstains on fertile days
- Uses condoms on fertile days

88%

- Abstains on fertile days
- Reminds me to check for secretions
- Asks me if we can have sex

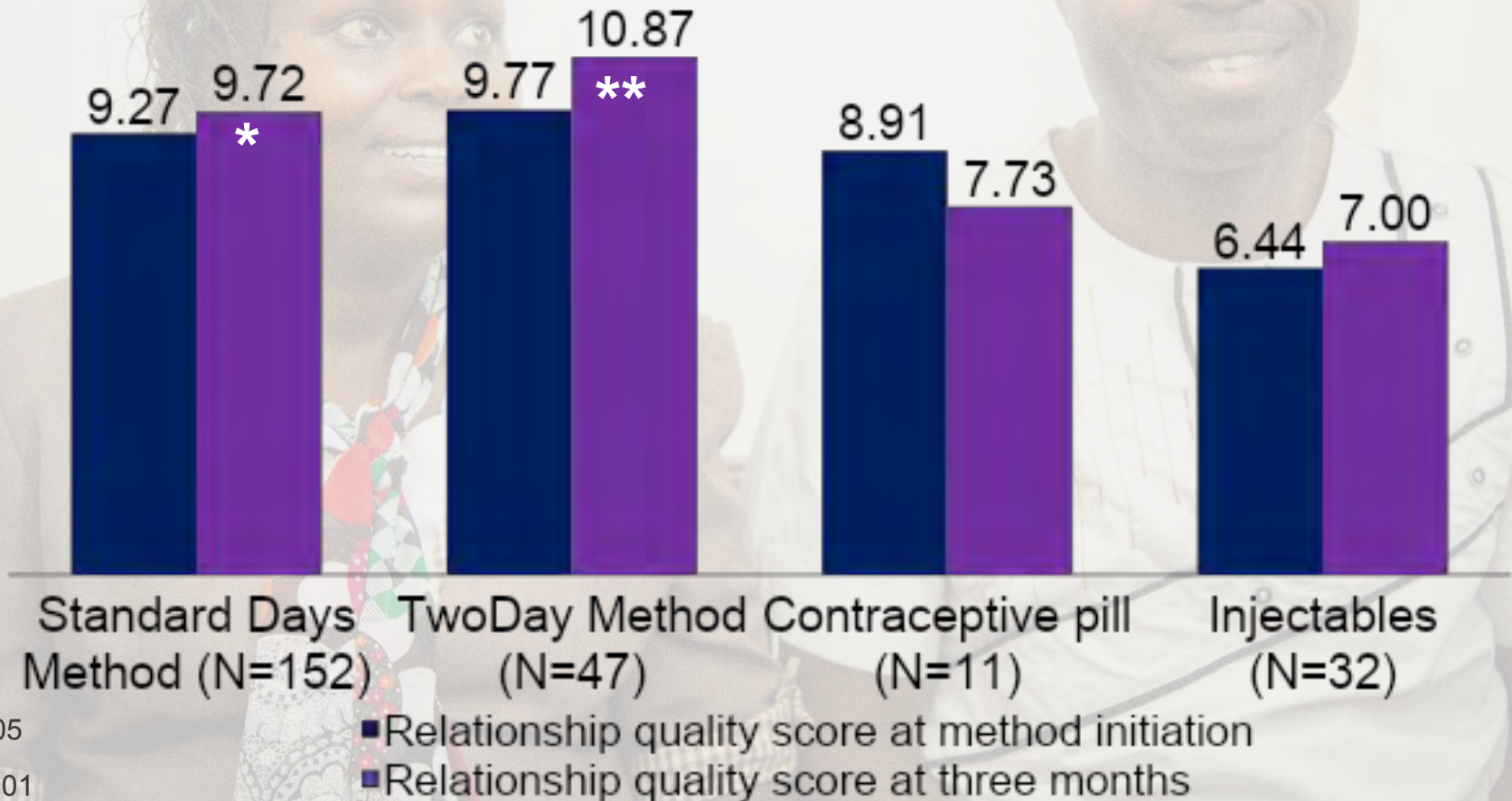
57%

- Reminds me when it is time for another injection
- Gives me money to purchase injection, for transport to health facility, and for soft drinks during the journey

6/8*

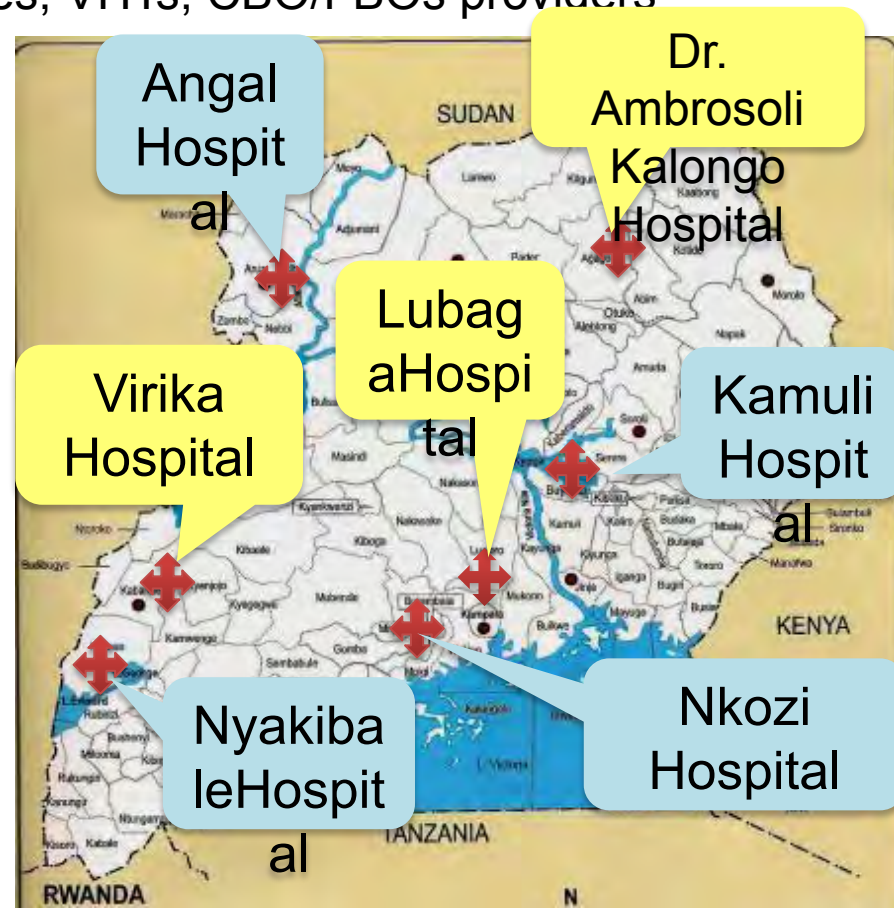
- Reminds me to take pill
- Gets refill for me
- Buys soft drinks to use while taking the pills

The **improvement in relationship** scores for **FAM users** was statistically significant after 3 months.



Project Overview

- **Family planning services offered across sites in Uganda**
 - Hospitals and health centers via nurses and midwives
 - Community level via expert couples, VHTs, CBO/FBOs providers
- **FP services integrated into:**
 - MCH & antenatal visits
 - HIV visits
 - Community outreach
- **FAM package included:**
 - Standard Days Method with CycleBeads (new),
 - TwoDay Method (new)
 - Lactational Amenorrhea Method (expanded)
 - Billings Ovulation Method (expanded)



Training & Service Delivery

IMPLEMENTATION ACTIVITIES

- Providers were equipped to inform and counsel clients on FAM options at the facility and community level
- Referrals for further medical support to Health facilities and Hospitals



Supportive Supervision

IMPLEMENTATION ACTIVITIES

- 7 Health Facilities coordinate, support and supervise lower level health units, VHTs through:
 - On-site supportive supervision with the Knowledge Improvement Tool (KIT)
 - Monthly support meetings with VHTs
- Central level field visits from UCMB & MOH



Awareness Raising

IMPLEMENTATION ACTIVITIES

- Expert couples sensitize community through home visits and health talks at group gatherings
- Radio spots and talk shows introduce new FAM and where to find services
- IEC materials: Posters, Tyre-covers, stickers, VHT bags, T-shirts



Creating a supportive environment

IMPLEMENTATION ACTIVITIES

- Sensitized religious leaders – Catholic, Protestant, Muslim, etc.
- Strengthened male involvement through partnership with Religious Leaders
- Stakeholder meetings with partners i.e MoH TCWG, District Health offices, etc.



Commodities & Reporting

IMPLEMENTATION ACTIVITIES

- Worked with JMS to distribute donated CycleBeads
- Improved provider capacity to record service delivery information and report through HMIS

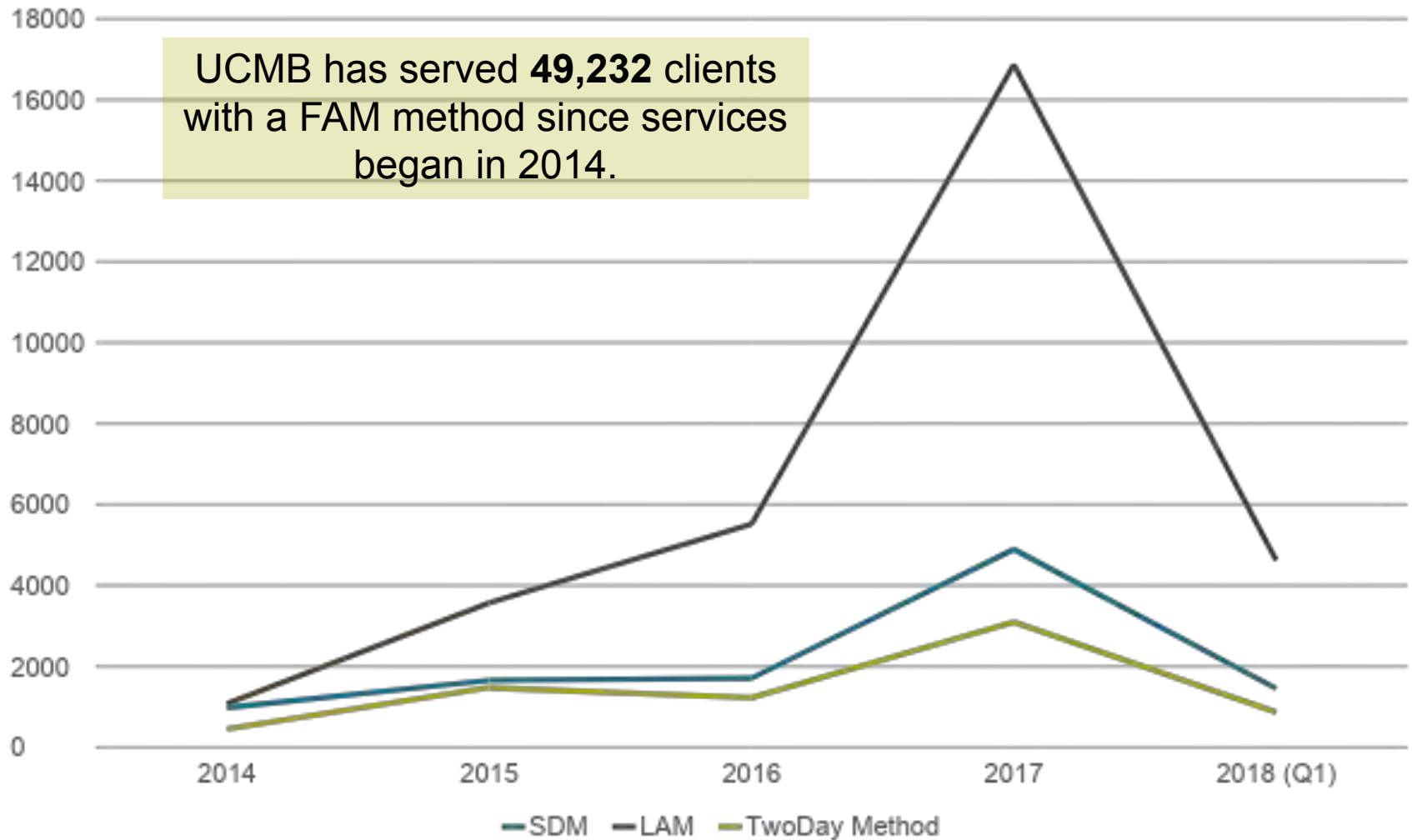


UCMB Outputs

- ✓ 138 healthcare workers and 53 community health workers from UCMB project sites trained in FAM since 2014
- ✓ Furnished NFP Clinics at the four sites
- ✓ Installed sign-posts for family planning in 7 hospitals
- ✓ Over 250,000 people reached with FAM & HTSP messages
- ✓ Partnered with 73 religious leaders through sensitization workshops

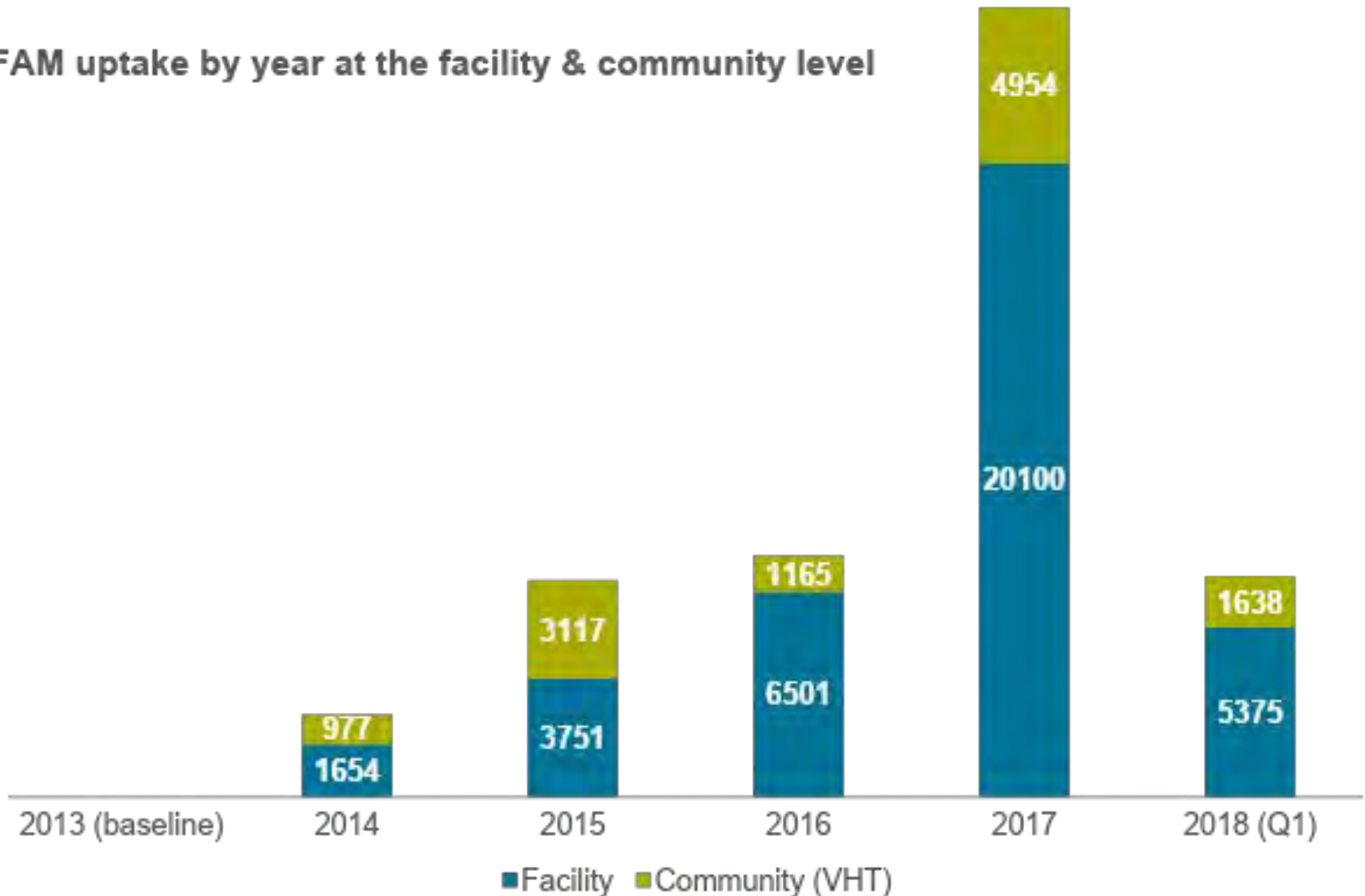


FAM uptake at UCMB sites



Where clients receive services

FAM uptake by year at the facility & community level



Lessons Learned

| Lessons Learned | Challenges | Possible solutions |
|--|---|---|
| Successful programs are so much more than training. | Integration of new FP methods requires system changes | <ul style="list-style-type: none">- Update HMIS registers to include new methods- Procure CycleBeads nationally- Add FAM to training and IEC plans- Include in performance-based financing |
| There is a significant demand for FAM once accurate information and quality services are available. | Lack of FAM awareness & myths about effectiveness | Continue awareness raising (particularly through radio) and effective service provision |
| Religious leaders and men can be key partners in family planning. | Opposition to FP & lack of appropriate methods | <ul style="list-style-type: none">- Regularly involve religious leaders in FP sensitization and work with them as partners- Raise awareness & dispell myths among men |

Why Disseminate to MCHTWG

UCMB is expanding access to FP for the first time, and there is a demand for FAM.

- Advocate for the recognition of FAM availability and increased accessibility in Uganda
- Advocate for the integration of FAM into method mix to expand options
- Advocate for FAM integration into HMIS and FP registers
- Advocate for availability of method commodities i.e Cyclebeads





Thank
You